

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006532

FILED
Feb 18, 2009
Secretary of State

Entity Name: GLOBAL CHILDREN'S CARE, INC.

Current Principal Place of Business:

5200 SE 145 ST
SUMMERFIELD, FL 34491

New Principal Place of Business:

Current Mailing Address:

PO BOX 189
SUMMERFIELD, FL 344920189

New Mailing Address:

FEI Number: 11-3699999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKAJI, DAVID C
5200 SE 145 ST
SUMMERFIELD, FL 34491 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: BUSTIN, GERALD T
Address: PO BOX 60
City-St-Zip: SUMMERFIELD, FL 344920060

Title: D () Delete
Name: AKAJI, DAVID C
Address: 5200 SE 145 ST
City-St-Zip: SUMMERFIELD, FL 34491

Title: M () Delete
Name: DUBBELD, MARK
Address: PO BOX 189
City-St-Zip: SUMMERFIELD, FL 34492

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID C. AKAJI

D

02/18/2009

Electronic Signature of Signing Officer or Director

Date